

GOVERNANCE & OVERSIGHT NARRATIVE

Local Authority: Four Corners/Carbon

Instructions:

In the cells below, please provide an answer/description for each question. **PLEASE CHANGE THE COLOR TO BLUE, OF SUBSTANTIVE NEW LANGUAGE INCLUDED IN YOUR PLAN THIS YEAR!**

1) Access & Eligibility for Mental Health and/or Substance Abuse Clients

Who is eligible to receive mental health services within your catchment area? What services (are there different services available depending on funding)?

Each individual, couple or family seeking care is provided a clinical screening regardless of ability to pay. This screening is often provided on the same day as requested. FCCBH has an open access model of care in most clinics. A discounted fee schedule exists to provide services to FCCBH catchment area residents based upon ability to pay. Several other funding sources can be accessed enabling qualified individuals/ families to receive services at discounted cost or no cost. No area resident is refused medically necessary services due to inability to pay. There are 3 Federally Qualified Health Centers (FQHC) in the FCCBH area. An FCCBH Licensed Mental Health Therapist (LMHT) is located in the Green River Medical Center serving low-income and unfunded populations. The other two FQHCs have grant-funded positions for in-house therapists.

Clinical services provided include: mental health and SUD screenings, assessments, individual, group and family therapy. Using clinical screening for early detection and developing individualized levels of care; access to counseling and medication evaluation and management are based upon client choice and medical necessity.

24/7 emergency crisis and referral services are available to all residents of the tri-county area through our designated Mobile Crisis Outreach Teams (MCOT). Mobile crisis teams are made up of both LMHT/Mental Health Officers with the authority to complete the emergency application for the mental health commitment process to assure safety for residents, and a case manager or peer support employee.

FCCBH also supports behavioral health prevention programming within the catchment area including: community education for early detection and informal intervention, and development and participation with community coalitions in identifying and responding to specific risk and protective factors within that community.

FCCBH works to develop and maintain a viable recovery oriented system of care in each community, and also offers a range of support and educational opportunities.

Who is eligible to receive substance abuse services within your catchment area? What services (are there different services available depending on funding)? Identify how you manage wait lists. How do you ensure priority populations get served?

Every person who comes to the Four Corners Community Behavioral Health clinics seeking care is provided a clinical screening regardless of ability to pay. This screening is often available on the same day as requested. Within this screening, priority populations are determined and often those individuals are offered a same-day appointment for an assessment. FCCBH offers an open access model of care in most clinics. Thus, FCCBH does not maintain a "wait list," as there is currently no demand for one. A discounted fee schedule exists to provide services to FCCBH catchment area residents based upon an

ability to pay. No area resident is refused medically necessary services due to an inability to pay.

What are the criteria used to determine who is eligible for a public subsidy?

Any resident unable to afford medically necessary clinical treatment will receive public subsidies. All residents are eligible to receive publicly subsidized prevention services. e many funding resources for which individuals may qualify. For example, FCCBH has applied for and been awarded the DOH Primary Care Grant several times, and this has allowed FCCBH to subsidize services for those who are unfunded/underfunded.

How is this amount of public subsidy determined?

FCCBH serves area residents with a range of prevention services and treatment, clinical treatment, acute care and after-acute care support services. Each individual's subsidy is based upon medical necessity as established by a psychiatric diagnostic assessment or a mental health evaluation performed by a Licensed Mental Health Professional. Prevention programming public subsidy is determined by incidence and prevalence of at-risk behavior as found in various public health surveys and the availability of and community acceptance of evidence-based practices that impact risk and protective factors in that community.

How is information about eligibility and fees communicated to prospective clients?

FCCBH publishes the sliding fee schedule on the www.fourcorners.ws website, and information is available in the client intake packet.

**Are you a National Health Service Corps (NHSC) provider? YES/NO
In areas designated as Health Professional Shortage Areas (HPSA) describe programmatic implications, participation in National Health Services Corp (NHSC) and processes to maintain eligibility.**

Yes, FCCBH is a very grateful NHSC provider. At the present time we have several FCCBH employees who have applied for the NHSC LRP and many who have successfully completed the program in the past. All three main clinic sites are certified, and we are applying for certification for the new Community Clinic. This program allows for a wonderful opportunity to recruit and retain professionals. The process is a considerable amount of work and the program is very strict in regards to following program expectations including clinical hours, type of qualifying work, supervision required and paperwork submission.

2) Subcontractor Monitoring

The DHS Contract with Mental Health/Substance Abuse Local Authority states: When the Local Authority subcontracts, the Local Authority shall at a minimum:

- (1) Conduct at least one annual monitoring review of each subcontractor. The Local Authority shall specify in its Area Plan how it will monitor their subcontracts.**

Describe how monitoring will be conducted, what items will be monitored and how required documentation will be kept up-to-date for active subcontractors.

FCCBH performs annual license verifications on the Utah Division of Occupational and Professional Licensing website. We obtain background criminal investigation (BCI) clearances annually for all individual clinical subcontractors. For clinical and respite subcontractors, we review their clinical

records. At least annually, we check the credentialing status of our subcontractors, and renew credentialing every three years. We hold randomized site visits for off-site subcontractor providers. On a monthly basis, we check subcontractors for an exclusion status in both the List of Excluded Individuals/Entities database and the System for Award Management database. Our prescribers practice within our facilities, using our electronic health record and are subject to our ongoing internal monitoring, and quality control processes.

FCCBH requires all subcontractors to follow Medicaid and Division of Substance Abuse and Mental Health clinical documentation requirements. Furthermore, FCCBH also audits for administrative documentation, quality of care and completion of duties. This includes insurance cards, correct coding, ROI (if applicable), and safety plans (if applicable), clinical license, acceptable malpractice insurance, background check, and business license. For external subcontractors, the initial assessment and treatment plan is required and reviewed for medical necessity before initial authorization is given for services. The same is required for ongoing authorizations.

For subcontracted organizations (for example inpatient facilities or residential facilities) FCCBH requires that subcontractors complete regular LEIE and SAM verification as well as verifying that all employed clinical staff are in good standing with DOPL.

By signing the confidentiality agreement, the organizational Provider provides acknowledgement that they shall perform their obligations related to disclosure of Protected Health Information (PHI) as that term is defined in Public Law 104-191.

Carbon County's Governance and Oversight:

Carbon County has one Commissioner assigned to sit on the FCCBH Board. He meets with them in all board meetings and regularly stays in touch with the Executive Director and her staff. He reviews budgets and approves many expenditures, policies and goals. Historically FCCBH has been very good to include the commissioner in most details that affect their success.

Carbon County's commitment is deep to ensure that FCCBH fills the needs of families and individuals that have mental health issues. Though we are not involved in the day to day operation of FCCBH, we know we need reporting and accountability to ensure proper expenditure of money and resources that come from tax dollars.